In re Laurie R. Montaito	
Debtor(s) Case Number:	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
(If known)	☐ The presumption arises.
	The presumption does not arise.
	☐ The presumption is temporarily inapplicable.

## CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and I, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
IA	□ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII.  Do not complete any of the remaining parts of this statement.
	Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	<ul> <li>a.   I was called to active duty after September 11, 2001, for a period of at least 90 days and  I remain on active duty /or/  I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;</li> </ul>
	OR
	b.   I am performing homeland defense activity for a period of at least 90 days /or/  I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

## Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed. a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11. b. $\square$ Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the 2 purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." Complete only column A ("Debtor's Income") for Lines 3-11. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. ☐ Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11. All figures must reflect average monthly income received from all sources, derived during the six Column A Column B calendar months prior to filing the bankruptcy case, ending on the last day of the month before Debtor's Spouse's the filing. If the amount of monthly income varied during the six months, you must divide the Income Income six-month total by six, and enter the result on the appropriate line. 3 Gross wages, salary, tips, bonuses, overtime, commissions. 1.745.09 9.976.11 Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V. Debtor Spouse Gross receipts 0.00 \$ 0.00 Ordinary and necessary business expenses \$ 0.00 \$ 0.00 Business income Subtract Line b from Line a 0.00 | \$ 0.00 Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V. 5 Debtor Spouse 0.00 | \$ Gross receipts 0.00 0.00 | \$ b. Ordinary and necessary operating expenses | \$ 0.00 Rent and other real property income Subtract Line b from Line a 0.00 | \$ 0.00 6 Interest, dividends, and royalties. 0.00 \$ 0.00 7 Pension and retirement income. 0.00 \$ 0.00 Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that 8 purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed. Each regular payment should be reported in only one column; if a payment is listed in Column A, do not report that payment in Column B. 0.00 \\$ 0.00 Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A 9 or B, but instead state the amount in the space below: Unemployment compensation claimed to be a benefit under the Social Security Act | Debtor \$ 0.00 | Spouse \$ 0.00 0.00 \$ 0.00 Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or 10 domestic terrorism. Debtor Spouse \$ \$ b. 8 \$ Total and enter on Line 10 0.00 | \$ 0.00 Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if 11 1,745.09 \$ Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s). 9,976.11

12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A		11,721.20
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION	<u> </u>	
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$	140,654.40
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)		
	a. Enter debtor's state of residence: NY b. Enter debtor's household size: 3	\$	70,151.00
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed.  ☐ The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption of top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII.  ☐ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.	does n	ot arise" at the

## Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Enter the amount from Line 12.		\$	11,721.20
17	Column B that was NOT paid on a dependents. Specify in the lines be spouse's tax liability or the spouse's amount of income devoted to each not check box at Line 2.c, enter zer			
	a. Husband's Car Paymen b. Husband's Credit Cards			
	c. Husband's 401(k) Loan	\$ 342.00 \$ 102.62		
	d.	\$		
	Total and enter on Line 17		\$	893.58
18	Current monthly income for § 70	7(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$ .	10,827.62
	Part V. C	ALCULATION OF DEDUCTIONS FROM INCOME		
	Subpart A: De	ductions under Standards of the Internal Revenue Service (IRS)		
19A	Standards for Food, Clothing and C at www.usdoj.gov/ust/ or from the that would currently be allowed as additional dependents whom you so		\$	1,234.00
	Out-of-Pocket Health Care for pers	Enter in Line all below the amount from IRS National Standards for ons under 65 years of age, and in Line a2 the IRS National Standards for ons 65 years of age or older. (This information is available at		
19B	www.usdoj.gov/ust/ or from the cle who are under 65 years of age, and older. (The applicable number of po- be allowed as exemptions on your if you support.) Multiply Line a1 by I Line c1. Multiply Line a2 by Line it	ork of the bankruptcy court.) Enter in Line b1 the applicable number of persons lenter in Line b2 the applicable number of persons who are 65 years of age or ersons in each age category is the number in that category that would currently dederal income tax return, plus the number of any additional dependents whom Line b1 to obtain a total amount for persons under 65, and enter the result in b2 to obtain a total amount for persons 65 and older, and enter the result in Line		
19B	www.usdoj.gov/ust/ or from the cle who are under 65 years of age, and older. (The applicable number of pe be allowed as exemptions on your if you support.) Multiply Line a1 by I Line c1. Multiply Line a2 by Line i c2. Add Lines c1 and c2 to obtain a  Persons under 65 year	erk of the bankruptcy court.) Enter in Line b1 the applicable number of persons enter in Line b2 the applicable number of persons who are 65 years of age or ersons in each age category is the number in that category that would currently ederal income tax return, plus the number of any additional dependents whom Line b1 to obtain a total amount for persons under 65, and enter the result in b2 to obtain a total amount for persons 65 and older, and enter the result in Line total health care amount, and enter the result in Line 19B.  The soft age  Persons 65 years of age or older		
19B	www.usdoj.gov/ust/ or from the cle who are under 65 years of age, and older. (The applicable number of po- be allowed as exemptions on your a you support.) Multiply Line al by Line cl. Multiply Line a2 by Line to c2. Add Lines cl and c2 to obtain a	rk of the bankruptcy court.) Enter in Line b1 the applicable number of persons lenter in Line b2 the applicable number of persons who are 65 years of age or ersons in each age category is the number in that category that would currently ederal income tax return, plus the number of any additional dependents whom Line b1 to obtain a total amount for persons under 65, and enter the result in b2 to obtain a total amount for persons 65 and older, and enter the result in Line total health care amount, and enter the result in Line 19B.		

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20B	Local Standards: housing and utilities; mortgage/rent expense. En Housing and Utilities Standards; mortgage/rent expense for your coun available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of the number that would currently be allowed as exemptions on your fed any additional dependents whom you support); enter on Line b the tot debts secured by your home, as stated in Line 42; subtract Line b from not enter an amount less than zero.	ty and family size (this inform ourt) (the applicable family size deral income tax return, plus the al of the Average Monthly Pa Line a and enter the result in	nation is ze consists of the number of yments for any Line 20B. <b>Do</b>	The formation and the second s
	a. IRS Housing and Utilities Standards; mortgage/rental expense b. Average Monthly Payment for any debts secured by your	\$	2,448.00	
	home, if any, as stated in Line 42	\$	2,433.99	
	c. Net mortgage/rental expense	Subtract Line b from Line a	<u> </u>	\$ 14.01
21	Local Standards: housing and utilities; adjustment. If you contend 20B does not accurately compute the allowance to which you are entit Standards, enter any additional amount to which you contend you are contention in the space below:	led under the IRS Housing ar	nd Utilities	\$ 0.00
	Local Standards: transportation; vehicle operation/public transpo	rtation expense.		
A PRICO CHARGO PRINTERS AND A PRINTE	You are entitled to an expense allowance in this category regardless of vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expens	f whether you pay the expense	-	
22A	included as a contribution to your household expenses in Line 8.	or or for which the operating	expenses are	
22.1	□ 0 □ 1 ■ 2 or more.			,
	If you checked 0, enter on Line 22A the "Public Transportation" amou Transportation. If you checked 1 or 2 or more, enter on Line 22A the Standards: Transportation for the applicable number of vehicles in the	'Operating Costs" amount fro	m IRS Local	and American
	Census Region. (These amounts are available at www.usdoj.gov/ust/			\$ 684.00
22B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that you public transportation expenses, enter on Line 22B the "Public Transportation. (This amount is available at <a href="www.usdoj.go">www.usdoj.go</a> court.)	you are entitled to an addition nsportation" amount from IR	al deduction for S Local	\$ 0.00
	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owners vehicles.)			
	☐ 1 ■ 2 or more.			
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankrupter of Monthly Payments for any debts secured by Vehicle 1, as stated in Line the result in Line 23. <b>Do not enter an amount less than zero.</b>	court); enter in Line b the tota	l of the Average	
	<u> </u>	\$	517.00	
	Average Monthly Payment for any debts secured by Vehicle b. 1. as stated in Line 42	\$	23.42	
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a.		\$ 493.58
	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the			
24	(available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 2, as stated in Little result in Line 24. Do not enter an amount less than zero.	ne 42; subtract Line b from L	ine a and enter	
	a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle	<u>  \$                                   </u>	517.00	
	b. 2, as stated in Line 42	\$	112.27	_
····	c. Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.		\$ 404.73
25	Other Necessary Expenses: taxes. Enter the total average monthly e state and local taxes, other than real estate and sales taxes, such as inc security taxes, and Medicare taxes. Do not include real estate or sale	ome taxes, self employment to		\$ 3,602.81

26	Other Necessary Expenses: involuntary deductions for en	nployment. Enter the total average monthly payroll		
20	deductions that are required for your employment, such as re Do not include discretionary amounts, such as voluntary	tirement contributions, union dues, and uniform costs. 401(k) contributions.	\$	0.00
27	Other Necessary Expenses: life insurance. Enter total ave life insurance for yourself. Do not include premiums for in any other form of insurance.	rage monthly premiums that you actually pay for term surance on your dependents, for whole life or for	\$	106,10
28	Other Necessary Expenses: court-ordered payments. Ent pay pursuant to the order of a court or administrative agency include payments on past due obligations included in Line	such as spousal or child support payments. Do not	\$	0.00
29	Other Necessary Expenses: education for employment or the total average monthly amount that you actually expend for education that is required for a physically or mentally challed providing similar services is available.	or education that is a condition of employment and for	S	0.00
30	Other Necessary Expenses: childcare. Enter the total aver- childcare - such as baby-sitting, day care, nursery and presch	age monthly amount that you actually expend on ool. Do not include other educational payments.	s	570.00
31	Other Necessary Expenses: health care. Enter the total avenual health care that is required for the health and welfare of your insurance or paid by a health savings account, and that is in cinclude payments for health insurance or health savings a	self or your dependents, that is not reimbursed by excess of the amount entered in Line 19B. <b>Do not</b>	s	170.00
32	Other Necessary Expenses: telecommunication services. In actually pay for telecommunication services other than your pagers, call waiting, caller id, special long distance, or internated welfare or that of your dependents. Do not include any amount of the property of the communication services.	basic home telephone and cell phone service - such as et service - to the extent necessary for your health and	\$	100.00
33	Total Expenses Allowed under IRS Standards. Enter the	total of Lines 19 through 32.	\$	8,261.23
2.4	Health Insurance, Disability Insurance, and Health Savin the categories set out in lines a-c below that are reasonably n dependents.	gs Account Expenses. List the monthly expenses in eccessary for yourself, your spouse, or your		
34	a. Health Insurance \$	430.00		
	b. Disability Insurance \$	0.00		
	c. Health Savings Account \$	0.00	\$	430.00
	Total and enter on Line 34.		9	
	If you do not actually expend this total amount, state your below:  \$	actual total average monthly expenditures in the space		
35	Continued contributions to the care of household or famile expenses that you will continue to pay for the reasonable and ill, or disabled member of your household or member of your expenses.	necessary care and support of an elderly, chronically	S	0.00
36	Protection against family violence. Enter the total average ractually incurred to maintain the safety of your family under other applicable federal law. The nature of these expenses is	the Family Violence Prevention and Services Act or	S	0.00
37	Home energy costs. Enter the total average monthly amount Standards for Housing and Utilities, that you actually expenditurustee with documentation of your actual expenses, and your actual expenses, and you claimed is reasonable and necessary.	for home energy costs. You must provide your case	S	0.00
38	Education expenses for dependent children less than 18. It actually incur, not to exceed \$156.25* per child, for attendant school by your dependent children less than 18 years of age.	ee at a private or public elementary or secondary You must provide your case trustee with	-	-,40
	documentation of your actual expenses, and you must exp necessary and not already accounted for in the IRS Stand	ards.	\$	0.00

<sup>&</sup>quot; Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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39	expenses exceed the combined all Standards, not to exceed 5% of th	pense. Enter the total average monthly owances for food and clothing (appare ose combined allowances. (This inform y court.) You must demonstrate that	l and services) in the IRS nation is available at www	National v.usdoj.gov/ust/	\$	0.00
40		ons. Enter the amount that you will coble organization as defined in 26 U.S.C		e form of cash or	\$	100.00
41	Total Additional Expense Dedu	ctions under § 707(b). Enter the total	of Lines 34 through 40		\$	530.00
		Subpart C: Deductions for	Debt Payment			
42	own, list the name of the creditor, check whether the payment includes scheduled as contractually due to	ims. For each of your debts that is secu identify the property securing the debt des taxes or insurance. The Average Me each Secured Creditor in the 60 month list additional entries on a separate page.	, state the Average Montl onthly Payment is the tota s following the filing of t	hly Payment, and al of all amounts he bankruptcy		
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?		
	a. American Honda Finan	ce 2013 Honda Accord Subject to Lease	\$ 112.27	□yes ■no		
	b. Central Mortgage	1967 Louis Kossuth Ave. Ronkonkoma, NY 11779	\$ 2,433.99	■yes □no		
	c. Charles Schwab	401(k) Loan	\$ 117.44	□yes <b>■</b> no		
	d. Ford Credit	2011 Ford Edge Subject to Lease	\$ 23.42 Total: Add Lines	□yes ■no	\$	2,687.12
43			pay me creamor in address	on to the		
	sums in default that must be paid	ler to maintain possession of the proper in order to avoid repossession or force list additional entries on a separate pag Property Securing the Debt	osure. List and total any e.	ld include any		
	sums in default that must be paid the following chart. If necessary,	in order to avoid repossession or forec	ty. The cure amount wou losure. List and total any e.  1/60th of the	ld include any such amounts in ne Cure Amount	4	0.00
44	sums in default that must be paid the following chart. If necessary,  Name of Creditor  aNONE-  Payments on prepetition priority priority tax, child support and ali	in order to avoid repossession or foreclist additional entries on a separate pag	ty. The cure amount wou losure. List and total any e.  1/60th of the state of the s	ld include any such amounts in the Cure Amount Cotal: Add Lines laims, such as	\$	
44	sums in default that must be paid the following chart. If necessary,  Name of Creditor aNONE-  Payments on prepetition priority priority tax, child support and ali not include current obligations,  Chapter 13 administrative expe	in order to avoid repossession or foreclist additional entries on a separate pag  Property Securing the Debt  y claims. Enter the total amount, dividency claims, for which you were liable	ty. The cure amount wou losure. List and total any e.  1/60th of the state of the s	ld include any such amounts in the Cure Amount of the Cure of the		
44	sums in default that must be paid the following chart. If necessary,  Name of Creditor  aNONE-  Payments on prepetition priority priority tax, child support and ali not include current obligations,  Chapter 13 administrative expechart, multiply the amount in lines  a. Projected average month b. Current multiplier for you issued by the Executive Country information is available at the bankruptcy court.)	Property Securing the Debt  Ty claims. Enter the total amount, dividing such as those set out in Line 28.  The same are eligible to file a case untally chapter 13 plan payment.  Ty chapter 15 plan payment.  Ty chapter 16 plan payment.  Ty chapter 17 plan payment.  Ty chapter 18 plan payment.  Ty chapter 19 plan payment.  Ty chapter 19 plan payment.	ty. The cure amount wou losure. List and total any e.  1/60th of the standard standa	Id include any such amounts in the Cure Amount of t	S	0.00
45	sums in default that must be paid the following chart. If necessary,    Name of Creditor     aNONE-     Payments on prepetition priority priority tax, child support and alimot include current obligations,   Chapter 13 administrative expectant, multiply the amount in line     a.   Projected average month     b.   Current multiplier for your issued by the Executive of information is available at the bankruptcy court.)     c.   Average monthly administrative expectant     Average monthly administrative expectan	Property Securing the Debt  Pr	ty. The cure amount wou losure. List and total any e.  1/60th of the standard standa	Id include any such amounts in the Cure Amount of t	\$	0.00
<del></del>	sums in default that must be paid the following chart. If necessary,    Name of Creditor     aNONE-     Payments on prepetition priority priority tax, child support and alimot include current obligations,   Chapter 13 administrative expectant, multiply the amount in line     a.   Projected average month     b.   Current multiplier for your issued by the Executive of information is available at the bankruptcy court.)     c.   Average monthly administrative expectant     Average monthly administrative expectan	Property Securing the Debt  Property Securing the Debt  Ty claims. Enter the total amount, dividing the such as those set out in Line 28.  The set of the amount in line b, and enter the abyte chapter 13 plan payment.  The dividing the determined under schedule of the first of the clerk of the strative expense of chapter 13 case  The set of the clerk of the strative expense of chapter 13 case  The set of the set of the set of the clerk of the strative expense of chapter 13 case  The set of t	ty. The cure amount would losure. List and total any e.  1/60th of the state of the	Id include any such amounts in the Cure Amount of t	S	0.00
45	Payments on prepetition priority tax, child support and ali not include current obligations,  Chapter 13 administrative expechart, multiply the amount in line  a. Projected average month b. Current multiplier for you issued by the Executive (information is available at the bankruptcy court.)  c. Average monthly adminitional Deductions for Debt Payments and chapter 13 administrative expechant, multiply the amount in line  a. Projected average month b. Current multiplier for you issued by the Executive (information is available at the bankruptcy court.)  c. Average monthly adminitional Deductions for Debt Payments and chapter 15 and	Property Securing the Debt  Pr	ty. The cure amount would losure. List and total any e.  1/60th of the state of the	Id include any such amounts in the Cure Amount of t	\$	0.00 0.00 2,687.12
45	sums in default that must be paid the following chart. If necessary,  Name of Creditor  aNONE-  Payments on prepetition priority priority tax, child support and ali not include current obligations,  Chapter 13 administrative expechart, multiply the amount in lines  a. Projected average month b. Current multiplier for your issued by the Executive (information is available at the bankruptcy court.)  c. Average monthly adminitive Total Deductions for Debt Payr	Property Securing the Debt  Property Securing the Debt  Ty claims. Enter the total amount, dividing the such as those set out in Line 28.  The set of the amount in line b, and enter the abyte chapter 13 plan payment.  The dividing the determined under schedule of the first of the clerk of the strative expense of chapter 13 case  The set of the clerk of the strative expense of chapter 13 case  The set of the set of the set of the clerk of the strative expense of chapter 13 case  The set of t	ty. The cure amount wou losure. List and total any e.  1/60th of the standard standa	Id include any such amounts in the Cure Amount of t	\$ \$	0.00 0.00 2,687.12
45	sums in default that must be paid the following chart. If necessary,  Name of Creditor aNONE-  Payments on prepetition priority priority tax, child support and ali not include current obligations,  Chapter 13 administrative expectant, multiply the amount in lines.  a. Projected average month b. Current multiplier for you issued by the Executive (information is available at the bankruptcy court.)  c. Average monthly adminitional Deductions for Debt Payre  Total of all deductions allowed	Property Securing the Debt  Pr	ty. The cure amount wou losure. List and total any e.  1/60th of the standard by the standard by 60, of all priority clear at the time of your banks ander chapter 13, complete the resulting administrative standard standard by the standard	Id include any such amounts in the Cure Amount of t	\$ \$	0.00 0.00 2,687.12

50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.	\$	-650.73		
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.	\$	-39,043.80		
	Initial presumption determination. Check the applicable box and proceed as directed.				
52	■ The amount on Line 51 is less than \$7,475*. Check the box for "The presumption does not arise" at the top of p statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.	age 1 o	of this		
	☐ The amount set forth on Line 51 is more than \$12,475* Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI.				
	☐ The amount on Line 51 is at least \$7,475*, but not more than \$12,475*. Complete the remainder of Part VI (I	ines 5	3 through 55).		
53	Enter the amount of your total non-priority unsecured debt	\$			
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$			
	Secondary presumption determination. Check the applicable box and proceed as directed.				
	The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.				
55	· · · · · · · · · · · · · · · · · · ·				
55	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumpt of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.	ion aris	ses" at the top		
55	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumpt	ion aris	ses" at the top		
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumpt of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.	health	and welfare of		
55	The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumpt of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.  Part VII. ADDITIONAL EXPENSE CLAIMS  Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the you and your family and that you contend should be an additional deduction from your current monthly income und 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average each item. Total the expenses.	e health er § monthl	and welfare of		
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<sup>\*</sup> Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.